## NOTICE OF GRANT AVAILABILITY

#### NAME OF GRANT PROGRAM:

Special Child Health and Early Intervention Svs.

Case Management

STATUTORY AUTHORITY:

**GRANT PROGRAM NO.** 07-57-SCH **TYPE OF AWARDS TO BE ISSUED:** 

Cost-reimbursement Grants

N.J.S.A. 26:1A-37; Title 26:2H-1 Hlth. Care Facil. Planning Act N.J.S.A. 26:2-60 N.J.S.A. 9:13 et seq.

#### PURPOSE FOR WHICH THE GRANT PROGRAM FUNDS WILL BE USED:

To provide partial support to twenty-one (21) existing Special Child Health Services Case Management Units. To assure that children with special health needs will have their care coordinated, and that parents receive assistance in addressing the needs of their children.

#### AMOUNT OF MONEY IN THE GRANT PROGRAM:

Funds available for this program are contingent upon State or Federal appropriations. It is expected that 21 county grants will be supported. Approximately \$2,500,000 is awarded annually.

# ELIGIBLE APPLICANTS MUST COMPLY WITH THE FOLLOWING REQUIREMENTS:

- 1. Terms and Conditions for the Administration of Grants
- 2. General and specific Grant Compliance requirements issued by the Granting Agency.
- 3. Applicable Federal Cost Principles relating to the Applicant

## GROUP OR ENTITIES WHICH MAY APPLY FOR THE GRANT PROGRAM:

Funding is limited to one case management unit in each county selected jointly by the County Board of Chosen Freeholders and Special Child Health Services.

## QUALIFICATIONS NEEDED BY APPLICANT TO BE CONSIDERED FOR A GRANT:

Must be a private non-profit or government agency with proven experience serving the special health needs of physically handicaped or chronically ill children. Must be able to provide services on a county-wide basis. Preference will be given to continuation of existing applicants who have performed satisfactorily.

# **APPLICATION PROCEDURES:**

Grants are offered as partial support to existing SCHS Case Management Units, process is non-competitive.

## FOR INFORMATION CONTACT:

Bonnie Teman

Special Child Health and Early Intervention Sys. **TELEPHONE:** (609) 777-7778

PO Box 364 FAX: (609) 292-3580

Trenton, NJ 08625-0364 **E-MAIL:** Bonnie.Teman@doh.state.nj.us

#### DEADLINE BY WHICH APPLICATIONS MUST BE SUBMITTED:

Application deadline is April 1 for funding July 1, 2006.

#### DATE BY WHICH APPLICANT SHALL BE NOTIFIED WHETHER THEY WILL RECEIVE FUNDS:

Notification of award will be made on/or about May 15, 2006.